

## Plan Readiness - Preparing for an Influx of Seniors and Persons with Disabilities Medicaid Beneficiaries

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Caring for some of California's most vulnerable citizens is nothing new for Molina Healthcare of California. Currently Molina manages over 15,000 Seniors and Persons with Disabilities (SPDs) members (5% of Molina's total California membership). And company-wide Molina has been managing this population for 30 years and currently serves 150,000 in the states where we operate health plans. However beginning in June, Molina and other Medicaid health plans

will begin managing more of these members. Why?

The change is a result of the California Legislature's passage and federal approval of the Medicaid Section 1115 Waiver last November. The Waiver contained provisions to enroll over 360,000 SPDs in 16 counties across the State into Medicaid managed health plans. Plans like Molina are confident this will mean improved access and coordinated care for beneficiaries. And the State of California is expecting that not only will care improve but the move will reduce healthcare costs for this population.

### **Plan Readiness – Where Are We?**

Molina is near-ready. Since the passage of the Waiver, Molina like other Medicaid health plans has been preparing for an increase in SPD enrollments. There is still work to do but Molina has:

- Continued assessing the adequacy of its provider networks. Staff has been visiting physician offices to assess and

communicate with staff and physicians about the need for accessibility ramps, parking, doorways, etc. to ensure SPDs have access to primary care and highly utilized specialists' offices.

- Continued to utilize the infrastructure and resources that have been successful in providing quality care to Molina's current SPD members. This includes complex case management, health risk assessments, and other healthcare services to make sure SPD members get the 'right care in the right setting at the right time.'
- Hired additional case managers and social workers. With the high incidence of mental health issues in the SPD population, these additional plan staff will be essential for ensuring SPD members successfully transition into managed care.
- Offered cultural sensitivity training to network providers.
- Added customer service staff

for this ‘high touch’ SPD population.

- Formed a statewide collaborative last year to better understand the needs and requirements of the SPD population and incorporated the ‘learnings’ from this group to create Molina’s Bridge2Access Program, which is focused on providing quality, effective care to the plans’ SPD members.

In addition to Molina’s own planning, the State of California required participating health plans to:

- Undergo a good standing review by the Department of Health Care Services (DHCS), the State’s Medicaid agency.
- Provide proof of provider network adequacy.
- Use a new facility site review form (Molina helped develop this form).
- Develop risk stratification tools and process for newly enrolling SPD members. Molina provided comment and this is now currently under review with DHCS.

### **Preparing the Molina Staff Model Offices**

Molina Healthcare is unique. Molina is one of a few Medicaid health plans that owns and operates primary care staff model clinics in California. Over the last year, many of Molina Healthcare’s 16 clinics were expanded and equipped to meet the needs of SPD members. This included add-

ing specialty equipment such as an exam table that adjusts to 17” off the floor. This makes it easier for wheelchair users and others to transfer to the table. And some Molina clinics are equipped with a Hoyer lift for wheelchair users who are not strong enough to self-transfer, or patients with balance difficulties. The clinic redesign includes a digital 800 pound wheelchair scale and reception counters being lowered to be more accessible. For hearing impaired and deaf patients, an assisted listening device and state of the art video interpreting service are now available.

### **How Will Enrollment Into Managed Health Plans Work?**

The State of California began sending notices to SPDs in March of this year to inform them that they would need to choose a Medicaid managed health plan. If SPDs do not choose a Medicaid managed care plan, they will be defaulted to a Medicaid plan with their existing fee for service (FFS) provider assuming that provider has joined a managed care network with a health plan.

Of the 16 counties, Molina is licensed to operate in five (Sacramento, Los Angeles, San Bernardino, Riverside, and San Diego). But it is in those five counties that over 70% of the SPDs live—nearly 275,000. Of this number, Molina expects to enroll between 1,000 and 2,000 new SPD members per month beginning in June of this year.

### **The Future**

States are looking for ways to cut

costs. As a result, states are becoming increasingly reliant on managed health plans to enroll Medicaid beneficiaries. According to a recent Kaiser Family Foundation report, state Medicaid programs continue to develop, expand and improve their managed care programs. The most common managed care policy changes involve adding counties to existing service areas, enrolling SPDs beneficiaries into managed care, and changing requirements so that enrollment in managed care is mandatory rather than voluntary for Medicaid populations such as the SPDs.

This shift to managed care makes sense for the State of California. And it makes sense for the 360,000 SPD Medicaid beneficiaries who will benefit from this transition with improved access to coordinated, quality healthcare services.

*Lisa A. Rubino serves as president for Molina Healthcare of California. Rubino is responsible for the overall strategic direction and operations for the California health plan. Rubino brings extensive experience in operations management and leadership. In her most recent tenure, Rubino was part of the Blue Shield of California senior leadership team. Serving as the senior vice president and chief executive of Blue Shield of California’s Individual, Small Group and Government business unit (with over \$3.5 billion in revenue), Rubino was responsible for product development, marketing, sales, provider contracting, health care services, finance and compliance. With nearly 30 years experience in healthcare operations, Rubino is widely regarded as an authority on government healthcare products*

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